



COMMISSION ON ETHICS

JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING DECEMBER 31, 20 08

GENERAL INFORMATION

Length of residence in Nevada 32
County in which you are registered to vote Washoe
Length of residence in the county in which you are registered to vote 30 /15
COMPENSATION FOR EXTRA-JUDICIAL ACTIVITIES
Disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount of the compensation so received. See Canon 4I(2)(a)(ii). Attach additional sheets if necessary. Date Nature and Place of Activity Name of Payor Amount Amo
INCOME
Disclose each source of income received by you and by each member of your household who is 18 years of age or older. No listing of individual clients, customers, or patients is required. Income received from such sources should be disclosed under a general heading such as "professional services." See Canon 4I(2)(a)(iii). Attach additional sheets if necessary. Source of Income Recipient Wife County Schl. Dist. Wife Cen R. Sym)

FINANCIAL DISCLOSURE STATEMENT-PAGE 2

REAL PROPERTY

9.	\$2,500 or more, other than your personal residence, in which you or a member of your household has a lebeneficial interest, and is located in Nevada or any adjacent state. See Canon 41(2)(a)(iv). Specific addare required — list the street address or legal description. You must designate whether the property is proved vacant land, agricultural land, commercial building apartments single-family reptal etc.				
	additional sheets if necessary. Specific Location	Nature/Particular Use	Interest Holder		
	1230 Pullman Dr.	Stock Family	SO HEO U AFE		
	- 5parks, NV 89434	rental	SEIVENIE		
	7				
	1				
		CREDITORS			
10.	Disclose the name of each creditor to w (a) the debit is secured by a mortgage of question 9 above, or (b) the debt is one retained by the seller or its assignee or described by the seller or its assignee.	r deed of trust on real property which a for which a security interest in a malesignee. See Canon 4I(2)(a)(v). Atta	is not required to be listed under		
-,			,		
	<u>B</u> 1	USINESS ENTITIES			
11.	List each business entity in which you of trust, director, officer, owner (in whole of security representing one percent or modentity. See Canon 4I(2)(a)(vi). Attach as Business Entity	or in part), limited or general partner, or some of the total outstanding stock or s	or holder of any close of stools and		
			,		
		;			

FINANCIAL DISCLOSURE STATEMENT-PAGE 3

GIFTS, BEQUESTS, FAVORS, OR LOANS

Date	ts if necessary. Name and Place of Gift	Name of Donor	Amo
None			
			<u> </u>
HEREBY CERTIFY TH	at the Information Contained in Thi	S DOCUMENT IS TRUE AND CO	MPLETE.

File this form with the State Court Administrator.

Deliver or mail to:

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Suite 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700

PERSONAL INFORMATION:

RECEIVE

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS) MAY **05** 2009

Please read the instruction before completing. Attach additional sheets if necessary.

COMMISSION **ON ETHICS**

	1					
NAME: James L. Soo	LEN	IGTH OF RES	IDENCE IN NE	VADA:	32	
ADDRESS: 1663 Cloud Peak Dr.						
CITY, STATE, ZIP: STATE AN ROUSE	LEN	IGTH OF RES	DENCE IN DIS	TRICT	١/	· · · · · · · · · · · · · · · · · · ·
TELEPHONE: (77%) 35%) 37%	E-M		10 00 10 10 10 10 10 10 10 10 10 10 10 1	L F	X	<u> </u>
(10) 35 35/7		Jap	ocean	YOUS	arl	3.4
ECTION A (Public Office): List all public offices for which this fi	nancial discl	sure statem	ent is require	ed		
nd check each box accordingly i.e. annual, candidate or appoin	unent nang. 1	NKS 281A.6	20.1(g).			
	Elected, appointed or appointed to elected (E, A, AE)	S	8	≈	<u>а</u> <u>⊜́</u>	₹ -
	Elected, appointed appointed to elect (E, A, AE)	Anrual Compensation	Date elected appointed	ANNUAL NRS 281A.600.18 281A.610.1	CANDIDATE NRS 281A.610.1(a).	APPOINTMENT NRS 2814 600 1
	ccted, pointe (E, A	Comp. ≱	Date e	AN S 281, 281A	CAN 281/	10 4 3
Title of Public Office and Name of Government	ठ के			Ŗ	ž	4 ½
				Check the	appropriate	boxes beli
Municipal Judge, City of	\$/4	3404.97	11/3/06			
- · · · · · · · · · · · · · · · · · · ·	\$. /			
Sparks						
ECTION B (Sources of Income): List each source of your incomy member of your household who is 18 years of age or older.	s ne (in addition NRS281A.620	n to any sour 0.1(b).	rce listed in S	ection A), or that	of
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Name of Public Officer:	

<u>SECTION D</u> (Creditors): List each creditor to whom you or a member of your household owes \$5,000 or more [EXCEPT: (1) debt secured by mortgage or deed of trust on your personal residence; and (2) debt on a motor vehicle for personal use retained by seller. NRS 281A.620.1(d).

Self Member

	Check the appropriate boxes
City Sonk (232 Mallman Dr.) Bank of America	VV
Bank of Mmerica	

SECTION E (Gifts): List the gift, identity of donor and value of each gift if all gifts received are in excess of an aggregate value of \$200 from a donor during the preceding taxable year [**EXCEPT**: (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action]. NRS 281A.620.1(e).

GII	<u>Donor</u>	Value of Gift
None		\$
		\$
		\$
		\$

<u>SECTION F</u> (Business Entities): List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity. NRS 281A.620.1(f).

Household Self Member

	Check the appropriate boxes		
	box	boxes	
None			
	i		
	i)		

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 55/09

Signature:

Print Name: Ta

ELECTED PUBLIC OFFICERS OR CANDIDATES SUBMIT TO:

Nevada Secretary of State, Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701 775.684.5705 • 775.684.5718 fax

NEVADA FINANCIAL DISCLOSURE STATEMENT Page 2 of 2

WHERE TO FILE:

APPOINTED PUBLIC OFFICERS SUBMIT TO:

Nevada Commission on Ethics 3476 Executive Pointe Way, Suite 10 Carson City, Nevada 89706 775.687.5469 • 775.687.1279 fax